



BWSR Conservation Easement Programs –
Conservation Practice Plans, Certification,
and Payment Procedures
2014 BWSR Academy

BWSR Conservation Easement Programs Conservation Practice Planning, Certification, and Payment Procedures

2014 BWSR Academy



Dave Rickert
Tom Wenzel



BWSR Conservation Easement Programs –
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2014 BWSR Academy

BWSR Conservation Easement Programs





Purpose of Presentation

To better understand how ...

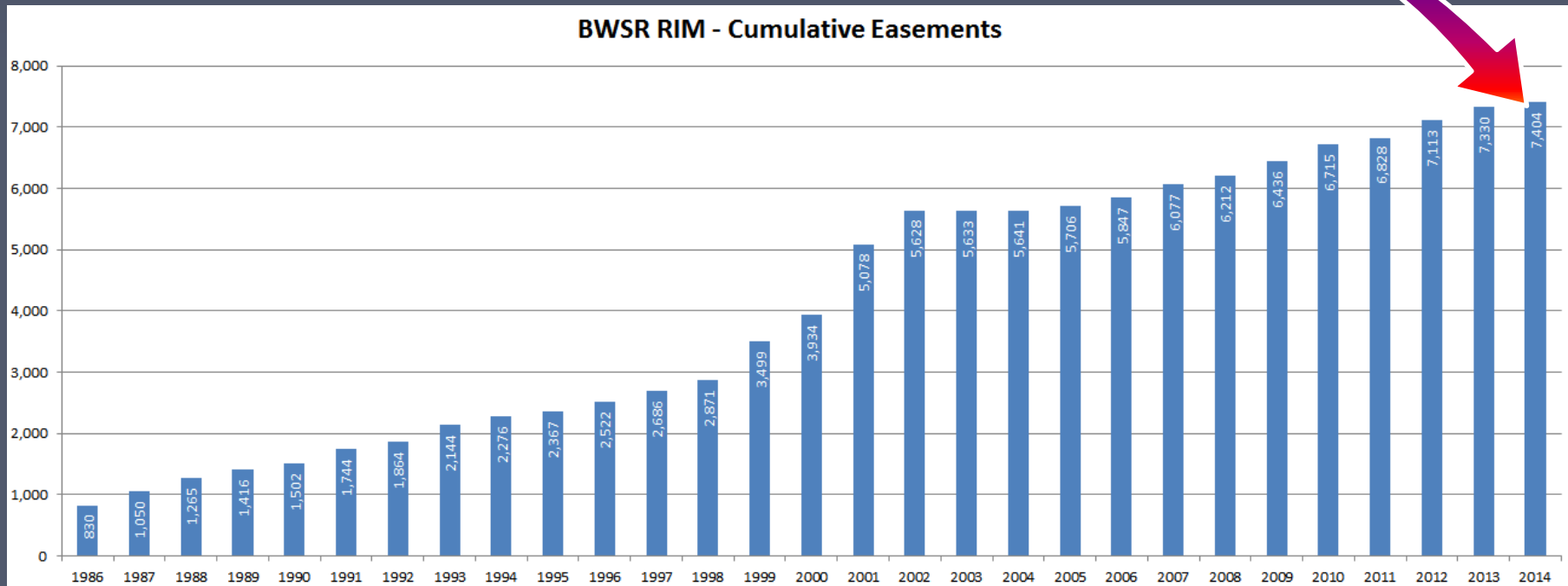
- Conservation planning process
- Conservation plan funds are made available
- Conservation plan funds are paid
- How and why conservation practices get certified





Why is This Important?

> 7,400 Easements



29 Years



Why is This Important?





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Numbers ?



183

**Number of BWSR Perpetual Conservation
Easements Recorded in 2013**



251

**Number of Conservation Practice
Reimbursement Payment Requests
(Vouchers)
that BWSR processed in 2013**



\$1.5 Million

Total Amount of RIM Practice Payments made in 2013

*(Does Not Includes Payments from
WRP and Others)*



35

Number of Wetland Restoration Construction Projects Completed – Certified in 2013



\$2,025,000

**Total Cost of Wetland Restoration
Construction in 2013**

(Includes Payments from WRP and Others)



65

Number of Practice Implementation Request
Forms (PIRFs) Processed by BWSR (Dave)
in 2013



**It is Important that SWCD's and Others
Working to Implement our Easement
Programs are Trained and Fully Understand
Program Policies, Processes, and Procedures**





Overview of Conservation Planning - Practices





Overview of Conservation Planning - Practices

CONSERVATION PRACTICE CODES AND DESCRIPTIONS

RR-1a	Introduced Grasses/Legumes To Be Established	RR-5	Diversion
RR-1b	Introduced Grasses/Legumes Already Established	RR-6	Erosion Control Structure
RR-2a	Native Grasses To Be Established	RR-7	Grass Waterway
RR-2b	Native Grasses Already Established	RR-8	Wetland Restoration
RR-3a	Tree and/or Shrub Planting To Be Established	RR-11	Highway Windbreak
RR-3b	Tree and/or Shrub Planting Already Established	RR-12	Wetland Creation
RR-4a	Field Windbreak To Be Established	RR-13	Existing Wetland
RR-4b	Field Windbreak Already Established	RR-14	Existing Watercourse/Ditch
		RR-FP	Wildlife Food Plot



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Reimbursable vs. Non-Reimbursable Practices



**BWSR Conservation Easement Programs –
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October-08

CONSERVATION EASEMENT PRACTICE PAYMENT WORKSHEET (CEPPW)

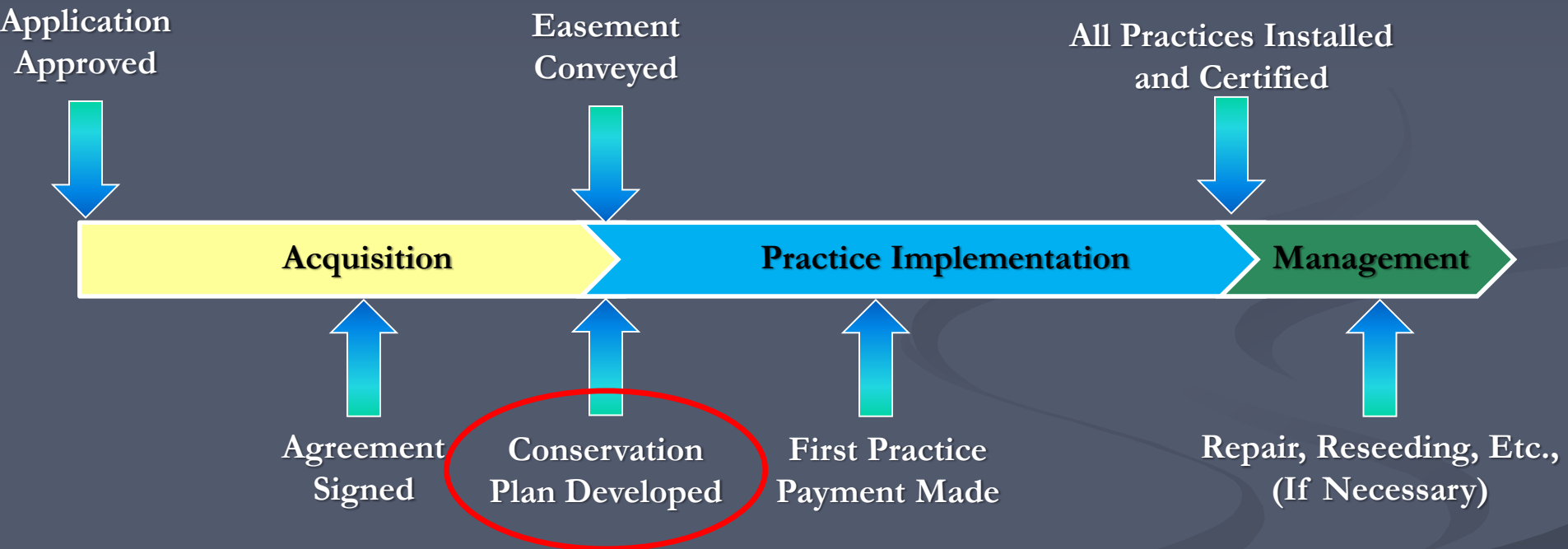
Easement ID No.:	Landowner Name:	Prepared By:	Date Prepared:
------------------	-----------------	--------------	----------------

PRACTICE CODE & SUBCODE		PRACTICE AREA(s)	PRACTICE ACRES			PRACTICE DOLLARS	
			A	B	C = (A+B)	D	E = (CxD)
			Primary	Supporting	Total	Max. Allowed Per Acre ¹	Max. Available
RR-1	Introduced Grasses	a. To Be Established				\$150	
		b. Already Established					
RR-2	Native Grasses	a. To Be Established				\$300	
		b. Already Established					
RR-3	Tress/Shrubs	a. To Be Established				\$400	
		b. Already Established					
RR-4	Field Windbreak	a. To Be Established				\$400	
		b. Already Established					
RR-5	Diversion						
RR-6	Erosion Control Structure						
RR-7	Grass Waterway						
RR-8	Wetland Restoration					\$600	
RR-11	Highway Windbreak					\$400	
RR-12	Wetland Creation						
RR-13	Existing Wetland						
RR-14	Existing Watercourse/Ditch						
RR-FP	Wildlife Food Plot						

= TOTAL EASEMENT ACRES



Conservation Plan Development





Conservation Plan Development

- ❖ Follow Program Policies and Guidelines
- ❖ Drives Available Practice Funding – Get it Right
- ❖ Keep it Simple
 - *(Minimize Number of Practice Areas When Possible)*



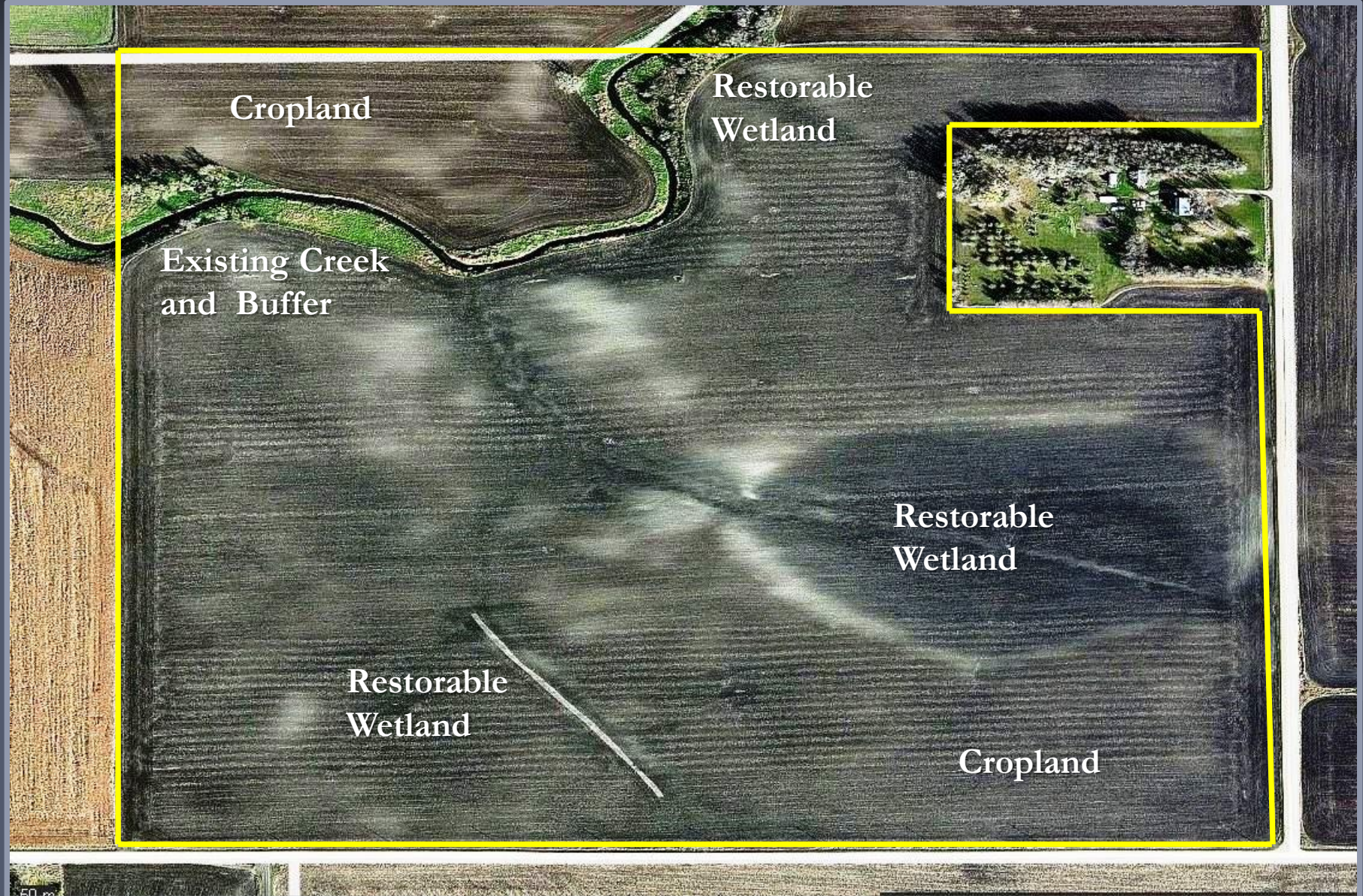
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Conservation Plan Development

Examples



Example 1



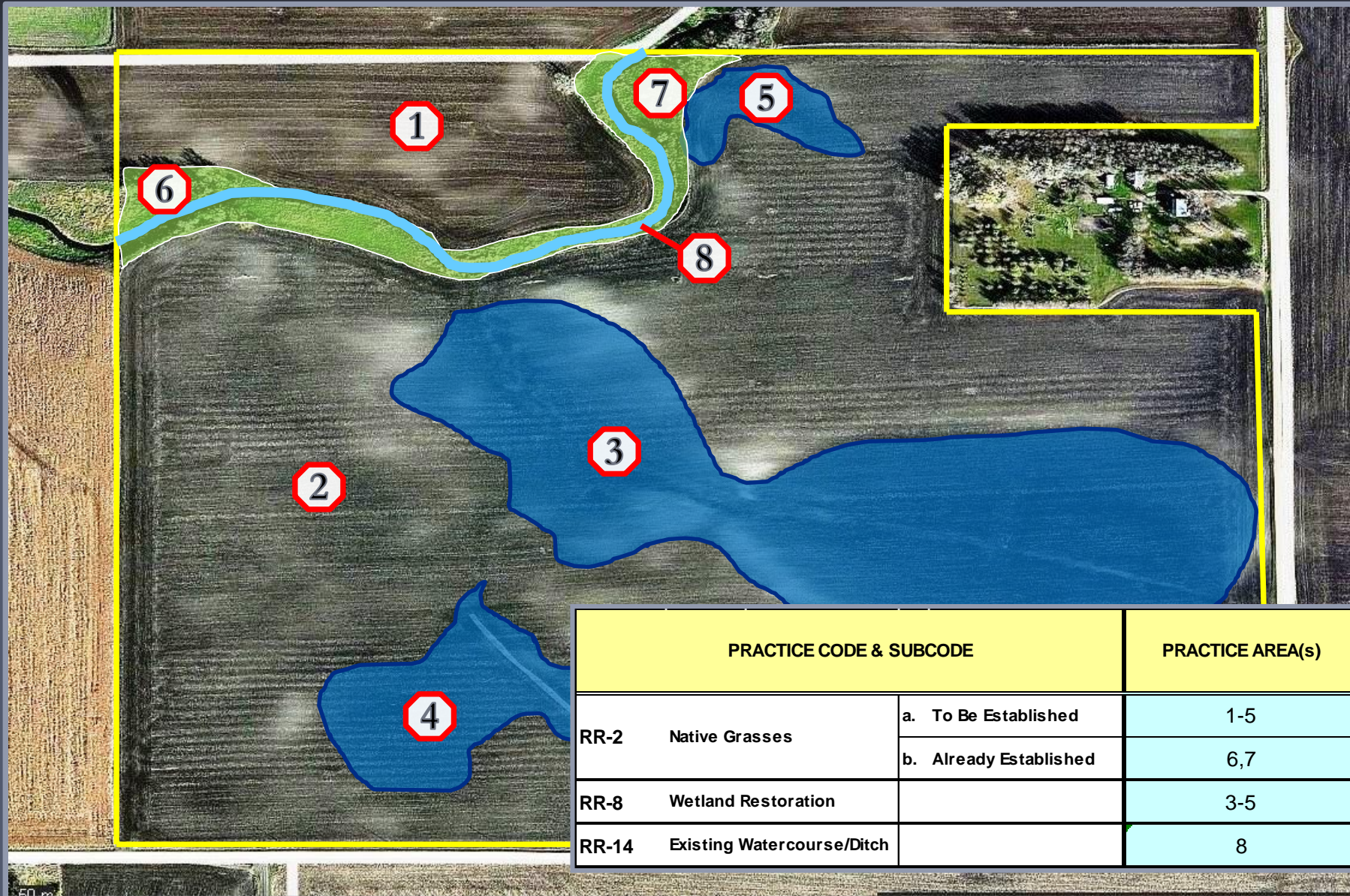


Example 1



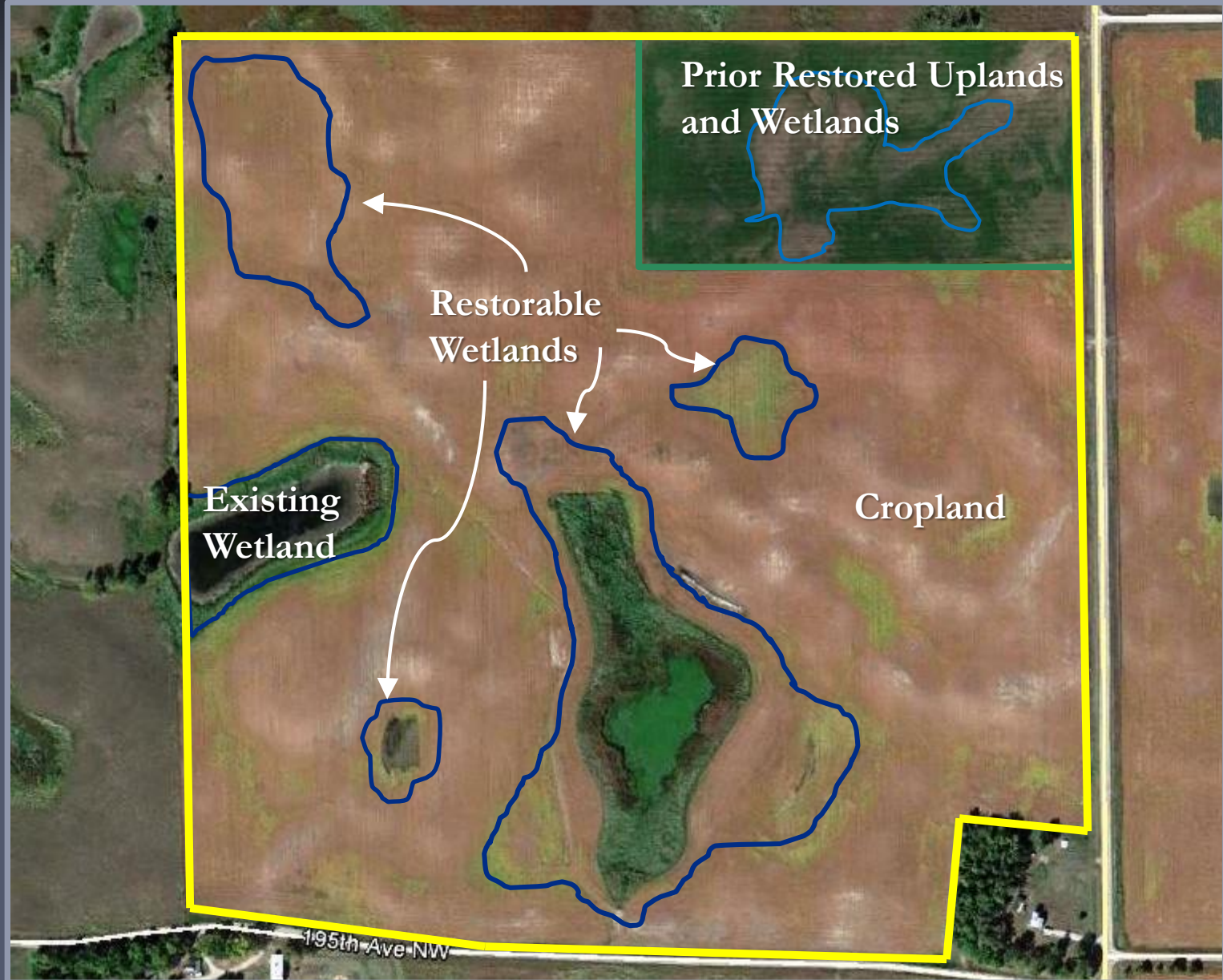


Example 1





Example 2





Example 2



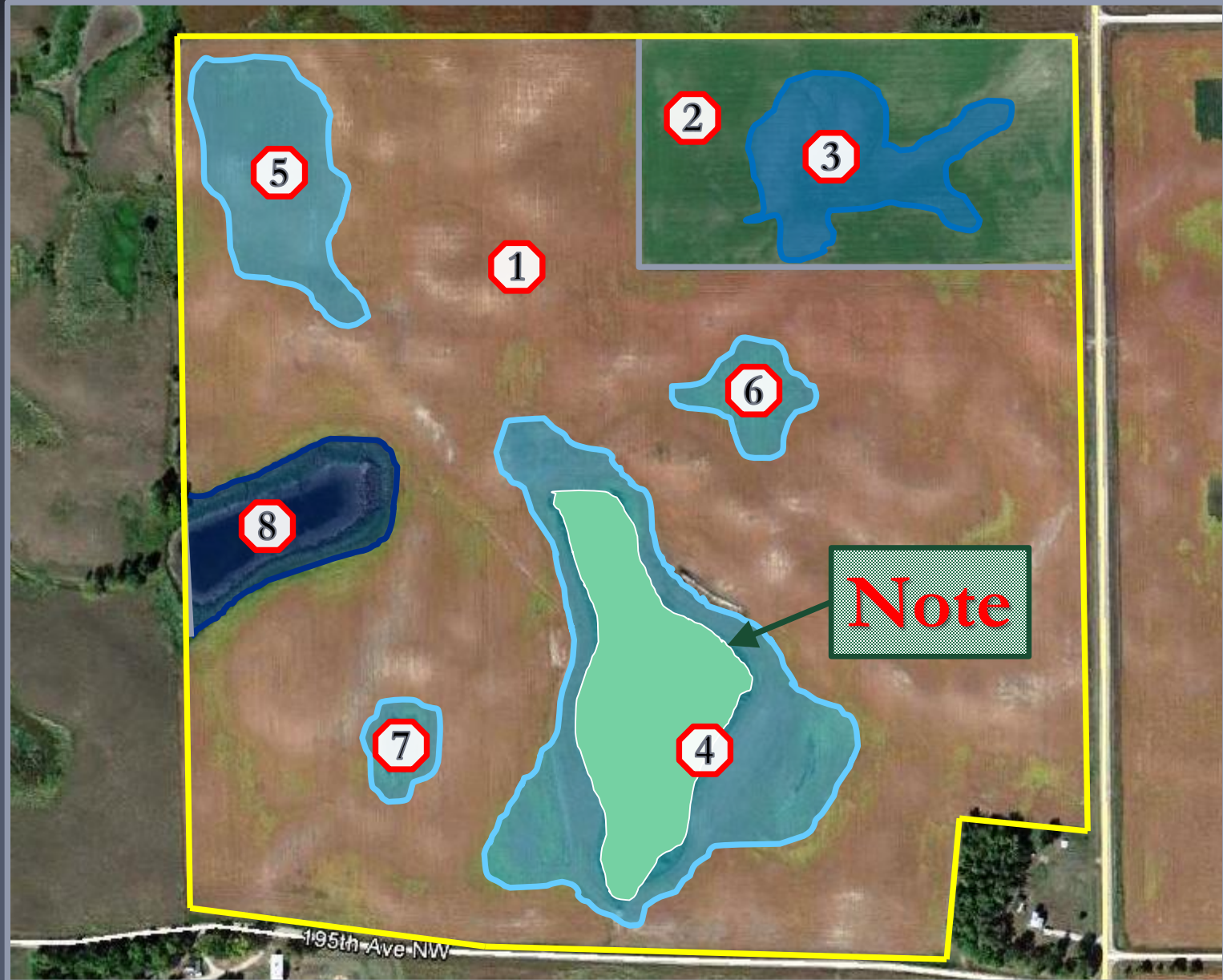


Example 2





Example 2





Funding and Making Conservation Practice Payments

*A Behind the Scenes Look at How it
Really Works*





RIM ID	Acres	Easement \$	Practice \$
06-01-02-01	20.0	\$20,000.00	\$2,400
40-03-02-01	25.0	\$50,000.00	\$600
75-10-02-01	150.0	\$100,000.00	\$15,000





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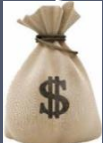
RIM ID	Acres	Easement \$	Practice \$
06-01-02-01	20.0	\$20,000.00	\$2,400
40-03-02-01	25.0	\$50,000.00	\$600
75-10-02-01	150.0	\$100,000.00	\$15,000

Olden Times



06-01-02-01

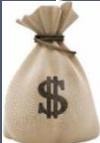
06-02-02-01



Ease.
Payment



Practice
Payment



Ease.
Payment

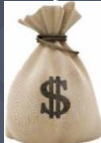


Practice
Payment



06-01-02-01

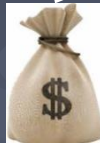
06-02-02-01



Ease.
Payment



Practice
Payment



Ease.
Payment



Practice
Payment

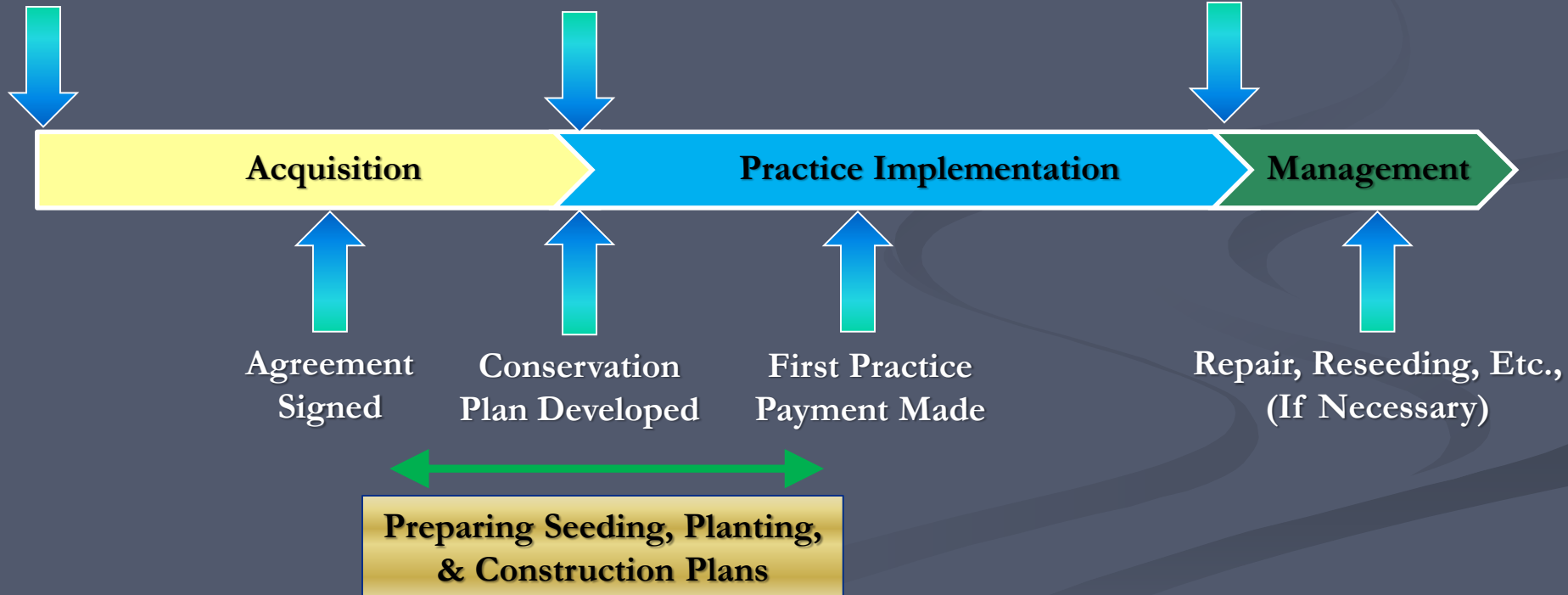


Practice \$ Pool





Application Approved





Seeding and Planting Plans

Things to Consider

- ❖ Site Preparation
- ❖ Seed Mixes
- ❖ Establishment Actions





Seeding and Planting Plans

Things to Consider

❖ Site Preparation

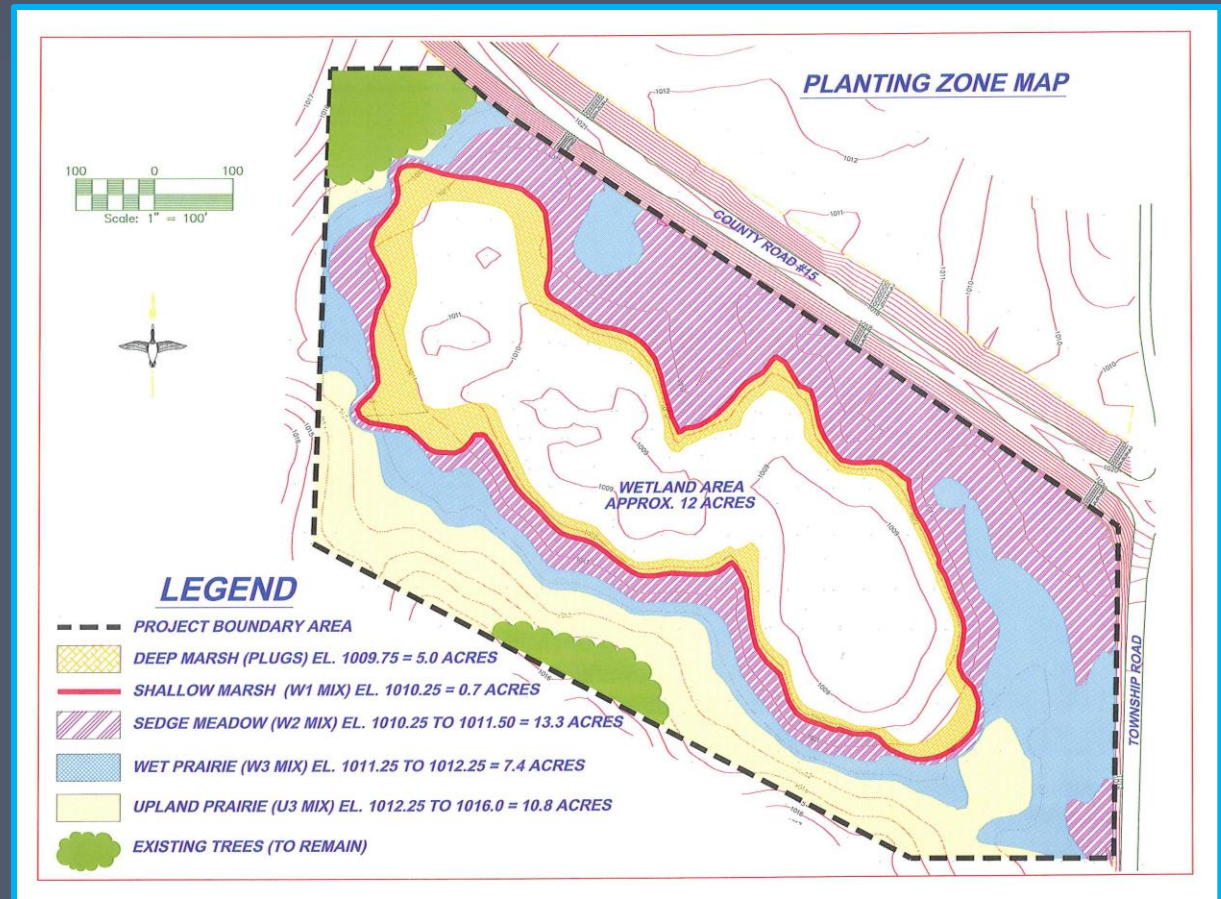




Seeding and Planting Plans

Things to Consider

❖ Seed Mixes





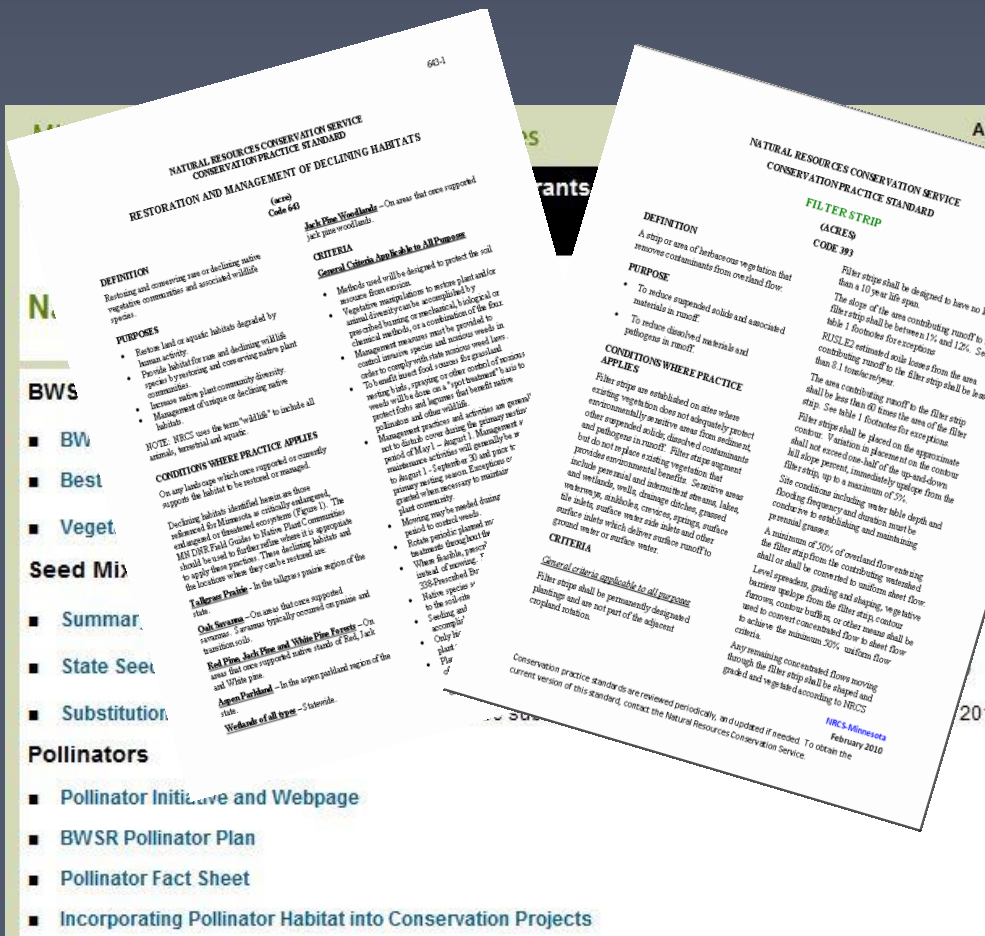
Proposed Vegetation: What's Acceptable?

		Minimum Recommended Number of Species					
Current Site Conditions	Natural Areas with High Species Diversity	15	20	30	30	30	40
	Some Intact Ecological Characteristics	10	20	25	25	25	35
	Agricultural Field	10	15	15	20	20	25
	Disturbed Site (Urban Soils, Compaction etc.)	5	10	15	20	20	25
	Disturbed Site with High Invasive Species Risk	5	5	15	20	20	20
		Soil Stabilization	Water Quality	Grassland Bird Nesting	Habitat for Multiple Wildlife Groups	Native Plant Community Restoration (marsh and sedge meadow)	Native Plant Community Restoration (prairie, savanna, forest)
		Project Function/Goals					



Seeding and Planting Plans *Things to Consider*

- ❖ Practice Standards
- ❖ NRCS Mixes
- ❖ BWSR Mixes
- ❖ Custom Mixes
- ❖ Etc.





Seeding and Planting Plans

Things to Consider

❖ Establishment Actions





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Seeding and Planting Plans

Things to Consider

Assessing Existing Vegetation: What's Acceptable?





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Construction Plans

Things to Consider

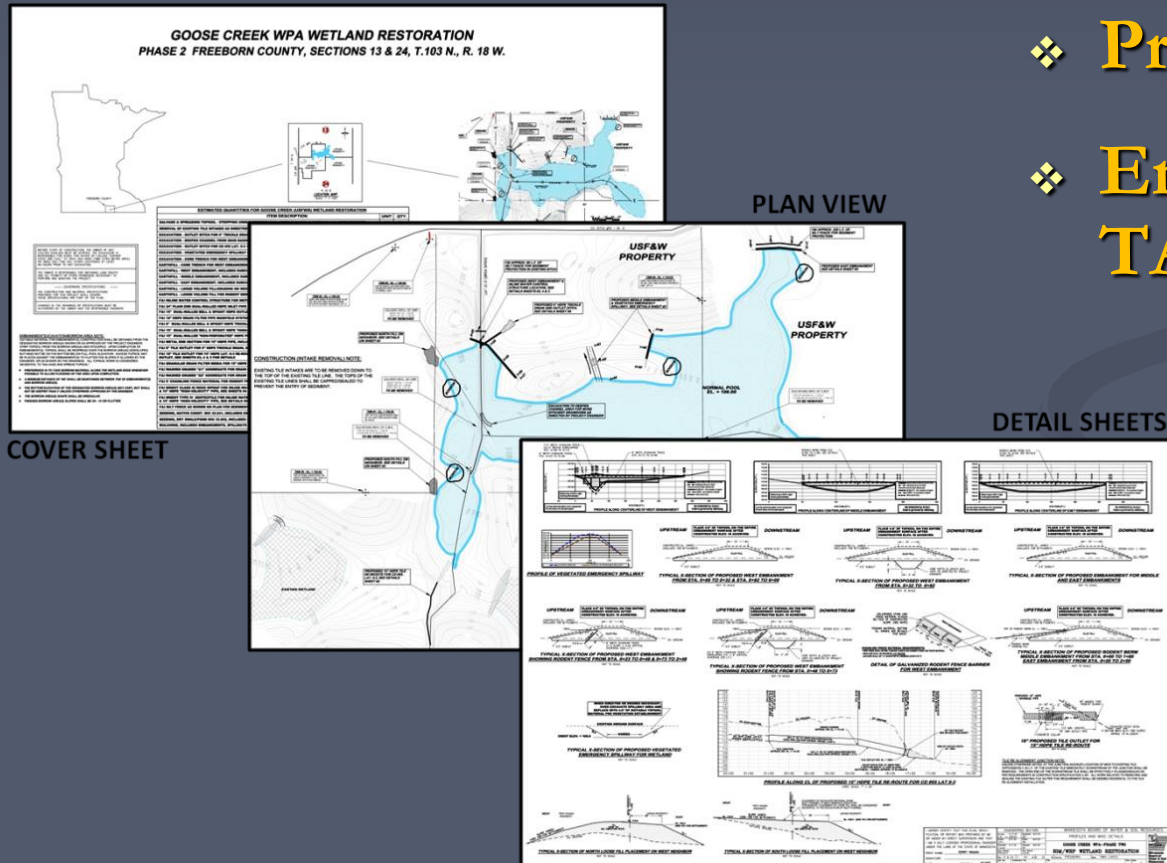




Construction Plans

Things to Consider

- ❖ Practice Standards
- ❖ Engineer Signature or TAA





Revising Conservation Plans

❖ Practice Area and/or Practice Acreage Change

October-08

CONSERVATION EASEMENT PRACTICE PAYMENT WORKSHEET (CEPPW)

Easement ID No.:	Landowner Name:	Prepared By:	Date Prepared:
------------------	-----------------	--------------	----------------

PRACTICE CODE & SUBCODE	PRACTICE AREA(s)	PRACTICE ACRES		C = (A+B)	PRACTICE DOLLARS	
		A	B		D	E = (CxD)
		Primary	Supporting	Total	Max. Allowed Per Acre ¹	Max. Available
RR-1 Introduced Grasses	a. To Be Established				\$150	
	b. Already Established					
RR-2 Native Grasses	a. To Be Established				\$300	
	b. Already Established					
RR-3 Tress/Shrubs	a. To Be Established				\$400	
	b. Already Established					
RR-4 Field Windbreak	a. To Be Established				\$400	
	b. Already Established					
RR-5 Diversion						
RR-6 Erosion Control Structure						
RR-7 Grass Waterway						
RR-8 Wetland Restoration					\$600	
RR-11 Highway Windbreak					\$400	
RR-12 Wetland Creation						
RR-13 Existing Wetland						
RR-14 Existing Watercourse/Ditch						
RR-FP Wildlife Food Plot						

= TOTAL EASEMENT ACRES



Revision Request Form

Practice Implementation/ Amendment Request Form



05/05

CONSERVATION EASEMENT REVISION REQUEST FORM

A. EASEMENT APPLICATION INFORMATION

Name of Applicant:	Name of SWCD	Easement Application No.

B. REVISION INFORMATION

	PREVIOUS REQUEST	REVISED REQUESTED (N/C) No Change
TOTAL EASEMENT ACRES (1/10)		
TOTAL EASEMENT PAYMENT		
TOTAL CONSERVATION PLAN COST-SHARE FUNDS REQUESTED		
TOTAL NON-COST-SHARE FUNDS REQUIRED		

- * Include a revised copy of the CREP calc sheet (if applicable), CEFW & CEPWW with each revision request
- * Include aerial photo accurately showing any revisions to the easement area (if applicable)

C. SWCD ACKNOWLEDGMENT

I certify that the landowner(s) are aware of, and in agreement with, the proposed financial changes to the easement and/or conservation practice payments and any associated changes to the easement area, as indicated in item B above. I also certify that the landowner(s) understand the effect these proposed changes will have on their financial obligations for establishing the conservation practices identified in the conservation plan.

(SWCD Representative)	(Date)

D. BWSR AUTHORIZATION

I have reviewed and I approve this request for revising the previously agreed to easement area and/or financial terms for this conservation easement.

(BWSR Authorization)	(Date)

WR-01104-01 (10-99)

PRACTICE IMPLEMENTATION/AMENDMENT REQUEST FORM

LINE	FY	FUND	AGENCY	ORG SUB	APPR UNIT	OBJECT SUB
AMOUNT			DESCRIPTION			
Vendor #			PO #		P1#	

PAYEE INFORMATION

Easement ID Number:	Landowner Name:	Address:

INSTALLATION REQUEST Reinstallation ☐ or Conservation Plan Amendment ☐

Has Practice Failed Before? (Applies to Reinstallations Only)				Proposed Date of (Re)installation (Month Year)	
<input type="checkbox"/> Y or <input type="checkbox"/> N					
Practice Type	Practice Area(S)	Acres to be Treated	Max. C/S Payment Rate	Max. C/S \$ Available	Total C/S \$ Requested
					Est. Total Cost
Explain Reason for Failure or Conservation Plan Amendment (attach additional sheets if necessary):					

ESTABLISHMENT REQUEST

Practice Type	Practice Area(s)	Total Practice Acres	Max. C/S Payment Rate	Max. C/S \$ Available	Total C/S \$ paid to date
C/S \$'s per acre paid to date	Per Acre C/S \$'s Remaining	Acres to be Treated	Total C/S \$ Available	Total C/S \$ Requested	Est. Total Cost
Describe Activity (attach additional sheets if necessary):					

SIGNATURES

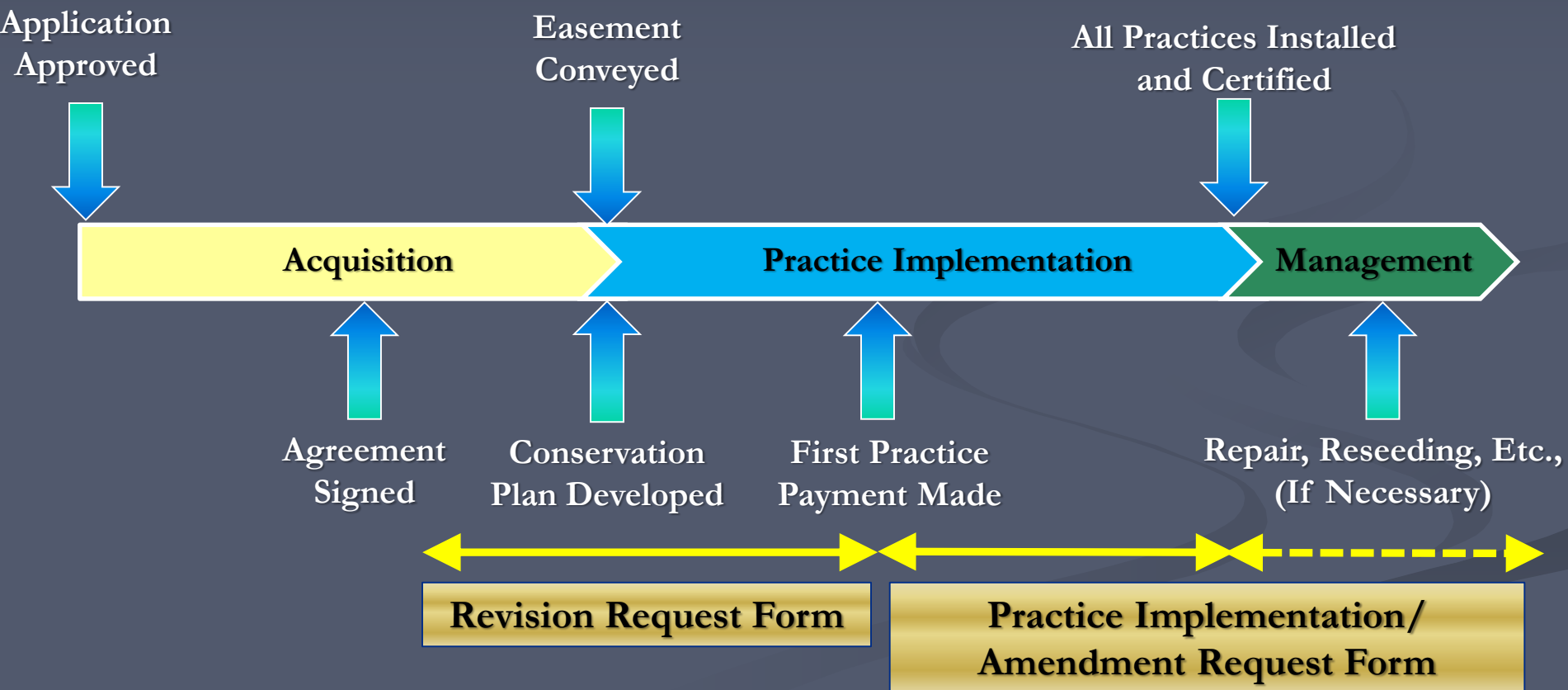
I hereby certify that to the best of my knowledge, the information in this form is accurate and in accordance with the terms of the conservation easement program. I also agree to and acknowledge my obligations associated with this request.

(Landowner Signature)	(Date)	(Authorized SWCD Representative)	(Date)

---For BWSR Use Only---			
<input type="checkbox"/> Request Approved			
<input type="checkbox"/> Request Not Approved			
<input type="checkbox"/> Comments Attached	(BWSR Easement Coordinator)	(Date)	



Revising Conservation Plans





Revision Request Form

05/05

CONSERVATION EASEMENT REVISION REQUEST FORM

A. EASEMENT APPLICATION INFORMATION

Name of Applicant:	Name of SWCD	Easement Application No.:
<input type="text"/>	<input type="text"/>	<input type="text"/>

B. REVISION INFORMATION

	PREVIOUS REQUEST	REVISED REQUEST (N/C) No Change
TOTAL EASEMENT ACRES (1/10)	<input type="text"/>	<input type="text"/>
TOTAL EASEMENT PAYMENT	<input type="text"/>	<input type="text"/>
TOTAL CONSERVATION PLAN COST-SHARE FUNDS REQUESTED	<input type="text"/>	<input type="text"/>
TOTAL NON-COST-SHARE FUNDS REQUIRED	<input type="text"/>	<input type="text"/>
*	Include a revised copy of the CREP calc sheet (if applicable), CEFW & CEPW with each revision request	
*	Include aerial photo accurately showing any revisions to the easement area (if applicable)	

C. SWCD ACKNOWLEDGMENT

I certify that the landowner(s) are aware of, and in agreement with, the proposed financial changes to the easement and/or conservation practice payments and any associated changes to the easement area, as indicated in item B above. I also certify that the landowner(s) understand the effect these proposed changes will have on their financial obligations for establishing the conservation practices identified in the conservation plan.

<input type="text"/>	<input type="text"/>
(SWCD Representative)	(Date)

D. BWSR AUTHORIZATION

I have reviewed and I approve this request for revising the previously agreed to easement area and/or financial terms for this conservation easement.

<input type="text"/>	<input type="text"/>
(BWSR Authorization)	(Date)



Practice Implementation/ Amendment Request Form

WR-01104-01 (10-99)

PRACTICE IMPLEMENTATION/AMENDMENT REQUEST FORM

LINE	FY	FUND	AGENCY	ORG/SUB	APPR UNIT	OBJECT/SUB
AMOUNT			DESCRIPTION			
Vendor # _____			PO # _____		PI# _____	

PAYEE INFORMATION

Easement I.D. Number: _____	Landowner Name: _____	Address: _____
-----------------------------	-----------------------	----------------

INSTALLATION REQUEST Reinstallation ☐ or Conservation Plan Amendment ☐

Has Practice Failed Before? (Applies to Reinstallations Only) <input type="checkbox"/> Y or <input type="checkbox"/> N				Proposed Date of (Re)installation (Month/Year)		
Practice Type	Practice Area(s)	Acres to be Treated:	Max. C/S Payment Rate	Max. C/S \$'s Available	Total C/S \$'s Requested	Est. Total Cost:
Explain Reason for Failure or Conservation Plan Amendment (attach additional sheets if necessary): _____ _____						

ESTABLISHMENT REQUEST

Practice Type:	Practice Area(s):	Total Practice Acres:	Max. C/S Payment Rate:	Max. C/S \$'s Available:	Total C/S \$'s paid to date:
C/S \$'s per acre paid to date:	Per Acre C/S \$'s Remaining:	Acres to be Treated:	Total C/S \$'s Available:	Total C/S \$'s Requested:	Est. Total Cost:
Describe Activity (attach additional sheets if necessary): _____ _____					

SIGNATURES

I hereby certify that to the best of my knowledge, the information in this form is accurate and in accordance with the terms of the conservation easement program. I also agree to and acknowledge my obligations associated with this request.			
(Landowner Signature)	(Date)	(Authorized SWCD Representative)	(Date)

--For BWSR Use Only--

<input type="checkbox"/> Request Approved			
<input type="checkbox"/> Request Not Approved			
<input type="checkbox"/> Comments Attached	(BWSR Easement Coordinator)	(Date)	



Revising Conservation Plans

❖ What if Estimated Costs Exceed Practice Maximum Rates?

October-08

CONSERVATION EASEMENT PRACTICE PAYMENT WORKSHEET (CEPPW)

Easement ID No.:	Landowner Name:	Prepared By:	Date Prepared:
------------------	-----------------	--------------	----------------

PRACTICE CODE & SUBCODE	PRACTICE AREA(s)	PRACTICE ACRES			PRACTICE DOLLARS	
		Primary	Supporting	Total	Max. Allowed Per Acre ¹	Max. Available
RR-1 Introduced Grasses	a. To Be Established				\$150	
	b. Already Established					
RR-2 Native Grasses	a. To Be Established				\$300	
	b. Already Established					
RR-3 Tress/Shrubs	a. To Be Established				\$400	
	b. Already Established					
RR-4 Field Windbreak	a. To Be Established				\$400	
	b. Already Established					
RR-5 Diversion						
RR-6 Erosion Control Structure						
RR-7 Grass Waterway						
RR-8 Wetland Restoration					\$600	
RR-11 Highway Windbreak					\$400	
RR-12 Wetland Creation						
RR-13 Existing Wetland						
RR-14 Existing Watercourse/Ditch						
RR-FP Wildlife Food Plot						

= TOTAL EASEMENT ACRES



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Requesting Practice Reimbursement Payments & Practice Certification



**BWSR Conservation Easement Programs –
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2014 BWSR Academy

Application
Approved

Easement
Conveyed

All Practices Installed
and Certified

Acquisition

Practice Implementation

Management

Agreement
Signed

Conservation
Plan Developed

First Practice
Payment Made

Repair, Reseeding, Etc.,
(If Necessary)

**Practice Implementation
Period**



Cost-Share Voucher and Practice Certification Form



**DOUBLE
FEATURE**

(5/05)

COST-SHARE VOUCHER & PRACTICE CERTIFICATION FORM							
A. PAYEE INFORMATION (Check if name and address change)				B. PROJECT INFORMATION			
Name:				I.D. Number			
Address:				BWSR Program: <input type="checkbox"/> Easement <input type="checkbox"/> Cost-Share <input type="checkbox"/> Other			
City, State, & Zip				Practice Type (one only)		Practice Area(s)	
						Acres Completed:	
C. COST INFORMATION		Basis of Request <input type="checkbox"/> Installation <input type="checkbox"/> Establishment <input type="checkbox"/> Reinstallation		Type of Request <input type="checkbox"/> Partial <input type="checkbox"/> Final		Completion Date:	
R/I	ITEM	QUANTITY	UNIT	UNIT PRICE	COST		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
					\$0.00		
R - Receipted Item / Invoiced Item					I - In-Kind Contribution		(attach additional sheets as necessary)
					Total:		\$0.00
I certify that this is an accurate and true summation of the actual costs and quantities of material, labor, and equipment used on the above project. In cases where the receipts included items not used on the project, I have corrected them accordingly.							
(Payee Signature) _____				(Date) _____			
D. PAYMENT INFORMATION				EASEMENT PROGRAMS [(c) cannot exceed (a) - (b)]			
TOTAL COST OF PRACTICE		\$0.00		(a) Maximum Payment Allowed			
				(b) Total of Previous Payments			
				(c) Balance Available		\$0.00	
OTHER FUNDING SOURCES (please identify source)							
_____		-		_____			
_____		-		_____			
_____		-		_____			
_____		-		_____			
Cost-Share Reimbursement Requested		\$0.00					
LANDOWNER / LAND OCCUPIER COST:		\$0.00					
				COST-SHARE PROGRAM ONLY [(b) + (c) cannot exceed 75% of (a)] (DO NOT USE THIS SECTION FOR EASEMENT PROGRAMS) (a) Total Cost Approved: _____ (b) Other public funds: _____ % _____ (c) District Share _____ % _____ (c) District Share _____ % _____			
E. SWCD CERTIFICATION							
I certify that an inspection has been performed and that the items identified in part C have been completed and are in accordance with the required practice standards and specifications.				I certify that I have reviewed this voucher and all supporting information and that to the best of my knowledge and belief, the quantities and billed costs or disbursements are accurate and are in accordance with terms of the program identified.			
_____ (Conservation District Technical Representative)				_____ (Authorized SWCD Representative)			
_____ (Date)				_____ (Date)			



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(5/05)

COST-SHARE VOUCHER & PRACTICE CERTIFICATION FORM					
A. PAYEE INFORMATION		B. PROJECT INFORMATION			
Name:		I.D. Number			
Address:		BWSR Program:			
City, State, & Zip		<input type="checkbox"/> Easement <input type="checkbox"/> Cost-Share <input type="checkbox"/> Other			
		Practice Type (one only) Practice Area(s) Acres Completed:			
C. COST INFORMATION		Basis of Request			
		<input type="checkbox"/> Installation <input type="checkbox"/> Establishment <input type="checkbox"/> Reinstallation <input type="checkbox"/> Partial <input type="checkbox"/> Final			
		Type of Request Completion Date:			
R/I	ITEM	QUANTITY	UNIT	UNIT PRICE	COST
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
					\$0.00
R - Receipted item / Invoiced Item I - In-Kind Contribution (attach additional sheets as necessary)				Total:	\$0.00
I certify that this is an accurate and true summation of the actual costs and quantities of material, labor, and equipment used on the above project. In cases where the receipts included items not used on the project, I have corrected them accordingly.					
(Payee Signature)			(Date)		



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D. PAYMENT INFORMATION		EASEMENT PROGRAMS {(c) cannot exceed (a) - (b)}									
TOTAL COST OF PRACTICE	<input type="text" value="50.00"/>	(a) Maximum Payment Allowed	<input type="text"/>								
		(b) Total of Previous Payments	<input type="text"/>								
OTHER FUNDING SOURCES (please identify source)		(c) Balance Available	<input type="text" value="50.00"/>								
<input type="text"/>	- <input type="text"/>	<div>COST-SHARE PROGRAM ONLY {(b) + (c) cannot exceed 75% of (a)} <i>(DO NOT USE THIS SECTION FOR EASEMENT PROGRAMS)</i></div> <table><tr><td>(a) Total Cost Approved:</td><td><input type="text"/></td></tr><tr><td>(b) Other public funds</td><td><input type="text"/> % <input type="text"/></td></tr><tr><td>(c) District Share</td><td><input type="text"/> % <input type="text"/></td></tr><tr><td>(c) District Share</td><td><input type="text"/> % <input type="text"/></td></tr></table>		(a) Total Cost Approved:	<input type="text"/>	(b) Other public funds	<input type="text"/> % <input type="text"/>	(c) District Share	<input type="text"/> % <input type="text"/>	(c) District Share	<input type="text"/> % <input type="text"/>
(a) Total Cost Approved:	<input type="text"/>										
(b) Other public funds	<input type="text"/> % <input type="text"/>										
(c) District Share	<input type="text"/> % <input type="text"/>										
(c) District Share	<input type="text"/> % <input type="text"/>										
<input type="text"/>	- <input type="text"/>										
<input type="text"/>	- <input type="text"/>										
<input type="text"/>	- <input type="text"/>										
<input type="text"/>	- <input type="text"/>										
Cost-Share Reimbursement Requested	<input type="text" value="0.00"/>										
LANDOWNER / LAND OCCUPIER COST:	<input type="text" value="0.00"/>										
E. SWCD CERTIFICATION											
I certify that an inspection has been performed and that the items identified in part C have been completed and are in accordance with the required practice standards and specifications.		I certify that I have reviewed this voucher and all supporting information and that to the best of my knowledge and belief, the quantities and billed costs or disbursements are accurate and are in accordance with terms of the program identified.									
<input type="text"/>		<input type="text"/>									
(Conservation District Technical Representative)	(Date)	(Authorized SWCD Representative)	(Date)								



BWSR Conservation Easement Programs –
Conservation Practice Plans, Certification,
and Payment Procedures
2014 BWSR Academy

Requesting Practice Reimbursement Payments & Practice Certification

(RR-8 Wetland Restoration)





RR-8 Wetland Restoration

- *Engineering Practice*
- *Cost per Acre ??*
- *Program Rates ??*





(RR-8 Wetland Restoration)

- ❖ Cost Estimate - Bids
- ❖ Final Measurements / Quantities
- ❖ Payment Verification / Practice Certification
- ❖ Payment
- ❖ Payment – Group Projects



Engineering Practices – (RR-8)

❖ Cost Estimate - Bids

COST ESTIMATE FORM

Project Name: Craig Reiner - RIM/WRP Project No: 2008-030
21-Sep-2010

1	Mobilization (not to exceed 5% of total bid price)	L.S.	1.0	\$500.00	\$500.00
2	Salvage & Spread Topsoil (includes stripping borrow areas & approx. 337 C.Y. of embankment subcut & berm subcut)	L.S.	1.0	\$1,011.00	\$1,011.00
3	Excavation - Spillways (P)	C.Y.	247.0	\$3.00	\$741.00
4	Earthfill - Embankment (P) (CV)	C.Y.	1389.0	\$3.50	\$4,861.50
5	Earthfill - Loose Volume Fill (P)	C.Y.	1609.0	\$2.75	\$4,424.75
6	Tile Block/Removal	L.F.	85.0	\$4.00	\$340.00
7	Furnish Seed Mix and Seeding - areas include: (Embankments, spillways)	Acre	3.0	\$600.00	\$1,800.00
8	F & I Mulch material- areas include: (includes embankments and spillways)	Acre	3.0	\$600.00	\$1,800.00
TOTAL				\$	\$15,478.25

BID FORM

Project Name: Craig Reiner - RIM/WRP Project No: 2008-030
21-Sep-2010

Contractor Name: Reiner Contracting Inc. Phone: 320-587-9886 Fax: 320-583-6616
Address: 21541 Hwy 7 W. City: Hutchinson, MN 55350 State: Minnesota

Contractor Signature: [Signature]

1	Mobilization (not to exceed 5% of total bid price)	L.S.	1.0		
2	Salvage & Spread Topsoil (includes stripping borrow areas & approx. 337 C.Y. of embankment subcut & berm subcut)	L.S.	1.0		
3	Excavation - Spillways (P)	C.Y.	247.0		
4	Earthfill - Embankment (P) (CV)	C.Y.	1389.0		
5	Earthfill - Loose Volume Fill (P)	C.Y.	1609.0		
6	Tile Block/Removal	L.F.	85.0		
7	Furnish Seed Mix and Seeding - areas include: (Embankments, spillways)	Acre	3.0		
8	F & I Mulch material- areas include: (includes embankments and spillways)	Acre	3.0		
TOTAL				\$	15,478.25

[illegible]



Engineering Practices – (RR-8)

- ❖ Payment Verification / Practice Certification
- ❖ P.E. or TAA

CONSTRUCTION CERTIFICATION STATEMENT

I HEREBY CERTIFY THAT A FINAL INSPECTION OF THIS PROJECT HAS BEEN PERFORMED AND THAT, TO THE BEST OF MY KNOWLEDGE, THE WORK COMPLETED IS IN ACCORDANCE WITH THE PLANS AND CONSTRUCTION SPECIFICATIONS AND THAT ANY CHANGES TO THE PLANS AND SPECIFICATIONS ARE SO NOTED.

SIGNATURE: _____ DATE: _____

CONSTRUCTION CERTIFICATION FORM

Project Name: _____ Project Number: _____ County / Field Office: _____
Easement Number(s): _____ Engineering Job Class: _____

CONSTRUCTION STATUS

☐ The project is fully constructed and deemed complete.
☐ Only "stand alone components" or "designated phases" of the project were completed. Describe in detail below:

VERIFICATION OF QUANTITIES

☐ A final check-out has occurred and the project or project components were constructed as bid with no changes. The contractor's invoice should match the accepted bid for the components that were completed.
☐ A final check-out has occurred and an adjustment of the original bid quantities is necessary and/or approved supplemental construction items were added to the project.
☐ Said construction changes are identified on change orders or thru other appropriate documentation (attach).
☐ Said quantity changes and/or supplemental construction items are described below:

STATUS OF AS-BUILTS

☐ As-built plans have yet to be prepared for this project.
☐ As-built plans have been prepared, and:
☐ A copy is enclosed for your files.
☐ A copy should already be in your possession.

CONSTRUCTION CERTIFICATION STATEMENT

I hereby certify that, to the best of my professional knowledge, judgement, and belief, that the completed work as identified on this form has been reviewed and was done in accordance with the approved construction plans and specifications. Any changes to the plans and/or specifications are or will be so indicated on the prepared as-built plans.

Signature: _____ Date: _____

Form Date: 3/17/2014



❖ Payment

[illegible]



❖ Payment – Group Projects

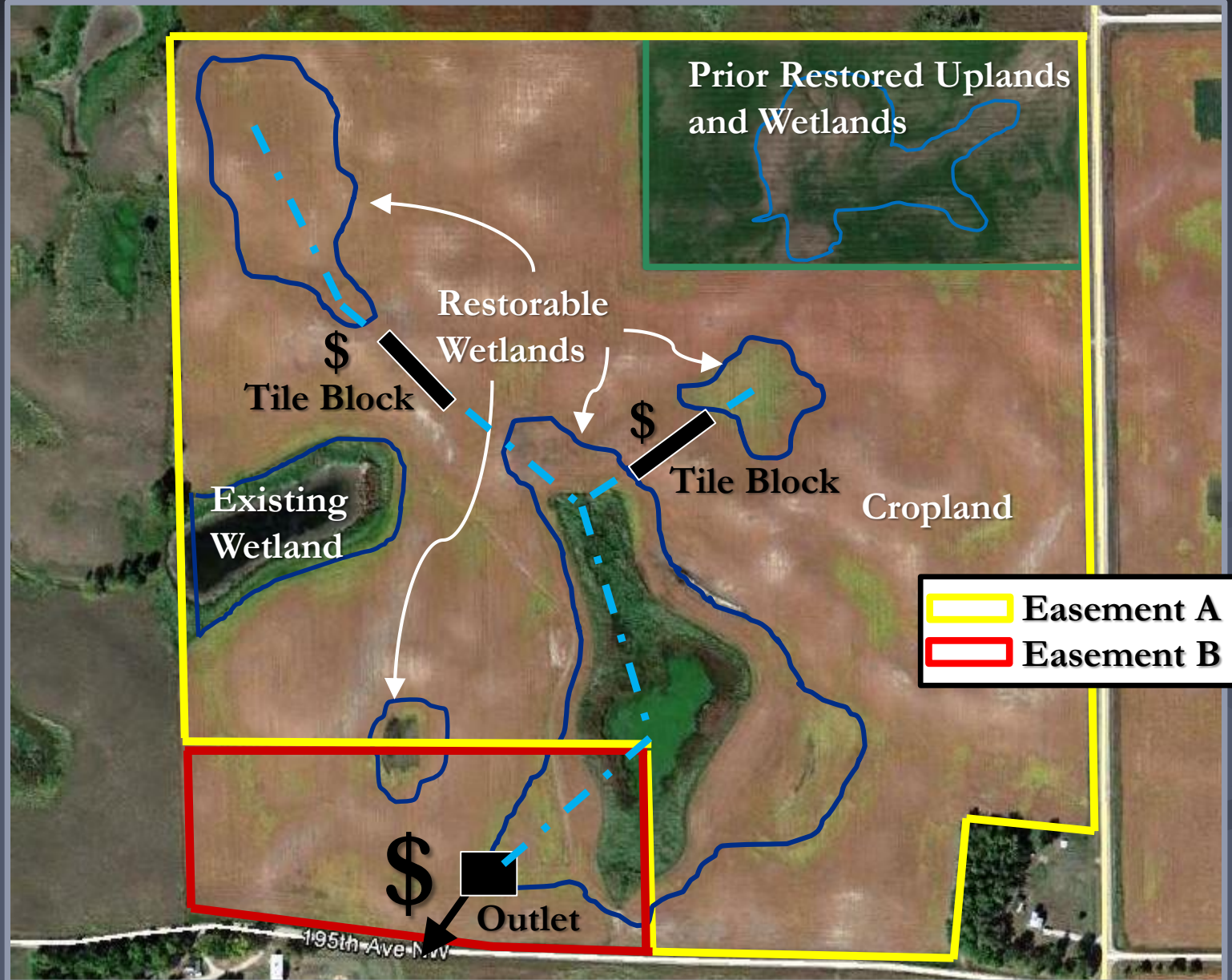
The image shows three overlapping forms titled "COST-SHARE VOUCHER & PRACTICE CERTIFICATION FORM". Each form is dated 5/05 and includes sections for:

- A. PAYEE INFORMATION:** Name, Address, City, State, & Zip.
- C. COST INFORMATION:** Basis of Request (Installation, Establishment, Other), R/R, ITEM, QUANTITY, UNIT, UNIT PRICE, and COST.
- D. PAYMENT INFORMATION:** TOTAL COST OF PRACTICE.
- E. SWCD CERTIFICATION:** A statement certifying that an inspection has been performed and that the items identified in part C have been completed and are in accordance with standards and specifications.

A large black question mark is superimposed over the forms, and the text "One Invoice" is written in large, bold, black letters across the center.



Example 3





Engineering Practices – (RR-8)

❖ Payment – Group Projects

(5/05)

Group Projects: Filling Out One Voucher (RR-8 Only)

COST-SHARE VOUCHER & PRACTICE CERTIFICATION FORM

A. PAYEE INFORMATION (Check if name and address change)

Name:

Add:

City:

B. PROJECT INFORMATION

I.D. Number:

BWSR Program: ☐ Easement ☐ Cost-Share ☐ Other

Practice Type (one only): Practice Area(s): Acres Completed:

Type of Request: ☐ Partial ☐ Final

Completion Date:

C. PRACTICE INFORMATION

Installation: ☐ Partial ☐ Final

Quantity: Unit: Unit Price: Cost:

Enter all RIM IDs (show primary easement first)

Write "multiple." Practice areas will likely be too numerous to fit into this field.

Enter cumulative RR-8 practice acres for all easements.

Total cost of group project (RR-8)

Show all partner contributions here. No need to divide payments out by RIM ID.

R - Receipted Item / Invoiced Item - In-Kind Contribution (attach additional sheets as necessary) Total:

I certify that this is an accurate and true summation of the actual costs and quantities of material, labor, and equipment used on the above project. In cases where the receipts included items not used on the project, I have corrected them accordingly.

(Payee Signature) (Date)

D. PAYMENT INFORMATION

TOTAL COST OF PRACTICE \$0.00

OTHER FUNDING SOURCES (please identify source)

Cost-Share Reimbursement Requested 0.00

LANDOWNER / LAND OCCUPIER COST: 0.00

EASEMENT PROGRAMS [(c) cannot exceed (a) - (b)]

(a) Maximum Payment Allowed

(b) Total of Previous Payments

(c) Balance Available \$0.00

COST-SHARE PROGRAM ONLY [(b) + (c) cannot exceed 75% of (a)]

(DO NOT USE THIS SECTION FOR EASEMENT PROGRAMS)

(a) Total Cost Approved:

(b) Other public funds %

(c) District Share %

(c) District Share %

E. SWCD CERTIFICATION

I certify that an inspection has been performed and that the items identified in part C have been completed and are in accordance with the required practice standards and specifications.

I certify that I have reviewed this voucher and all supporting information and that to the best of my knowledge and belief, the quantities and billed costs or disbursements are accurate and are in accordance with terms of the program identified.

Certification will apply to all RIM IDs claimed on this Voucher.

(Conservation District Technical Representative) (Date) (Authorized SWCD Representative) (Date)



BWSR Conservation Easement Programs –
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Questions?

Copy of Presentation and Handouts
Will be on Academy Website

